

STATE OF NORTH CAROLINA

File No.

20 CVD 147

WILKES County

In The General Court Of Justice

☒ District ☐ Superior Court DivisionName Of Plaintiff NORTH CAROLINA BAPTIST HOSPITAL and
WAKE FOREST UNIVERSITY HEALTH SCIENCESAddress
MEDICAL CENTER BLVD,

City, State, Zip

WINSTON-SALEM, NC 27157

VERSUS

Name Of Defendant(s)

WAYNE HOWARD DULA AND HOPE M. DULA

CIVIL SUMMONS☐ ALIAS AND PLURIES SUMMONS (ASSESS FEE)

G.S. 1A-1, Rules 3 and 4

To Each Of The Defendant(s) Named Below:

WAYNE HOWARD DULA

409 GILLIAM ROAD

NORTH WILKESBORO

NC

28659

Name And Address Of Defendant 2

HOPE M. DULA

409 GILLIAM ROAD

NORTH WILKESBORO

NC

28659

A Civil Action Has Been Commenced Against You!

You are notified to appear and answer the complaint of the plaintiff as follows:

1. Serve a copy of your written answer to the complaint upon the plaintiff or plaintiff's attorney within thirty (30) days after you have been served. You may serve your answer by delivering a copy to the plaintiff or by mailing it to the plaintiff's last known address, and
2. File the original of the written answer with the Clerk of Superior Court of the county named above.

If you fail to answer the complaint, the plaintiff will apply to the Court for the relief demanded in the complaint.

Name And Address Of Plaintiff's Attorney (if none, Address Of Plaintiff)

Stephen J. White, Esq.

OTT CONE & REDPATH, P.A.

P. O. BOX 160

Greensboro, NC 27402-0160

Date Issued

2-6-20

Time

11:51

☒ AM ☐ PM

Signature

☒ Deputy CSC ☐ Assistant CSC ☐ Clerk Of Superior Court☐ **ENDORSEMENT (ASSESS FEE)**

This Summons was originally issued on the date indicated above and returned not served. At the request of the plaintiff, the time within which this Summons must be served is extended sixty (60) days.

Date Of Endorsement

Time

☐ AM ☐ PM

Signature

☐ Deputy CSC ☐ Assistant CSC ☐ Clerk Of Superior Court

NOTE TO PARTIES: Many counties have **MANDATORY ARBITRATION** programs in which most cases where the amount in controversy is \$25,000 or less are heard by an arbitrator before a trial. The parties will be notified if this case is assigned for mandatory arbitration, and, if so, what procedure is to be followed.

(Over)

AOC-CV-100, Rev. 6/16

© 2016 Administrative Office of the Courts

RETURN OF SERVICE

I certify that this Summons and a copy of the complaint were received and served as follows:

DEFENDANT 1

<i>Date Served</i>	<i>Time Served</i> <input type="checkbox"/> AM <input type="checkbox"/> PM	<i>Name Of Defendant</i>
--------------------	---	--------------------------

- ☐ By delivering to the defendant named above a copy of the summons and complaint.
- ☐ By leaving a copy of the summons and complaint at the dwelling house or usual place of abode of the defendant named above with a person of suitable age and discretion then residing therein.
- ☐ As the defendant is a corporation, service was effected by delivering a copy of the summons and complaint to the person named below.

Name And Address Of Person With Whom Copies Left (If corporation, give title of person copies left with)

- ☐ Other manner of service (specify)

- ☐ Defendant WAS NOT served for the following reason:

DEFENDANT 2

<i>Date Served</i>	<i>Time Served</i> <input type="checkbox"/> AM <input type="checkbox"/> PM	<i>Name Of Defendant</i>
--------------------	---	--------------------------

- ☐ By delivering to the defendant named above a copy of the summons and complaint.
- ☐ By leaving a copy of the summons and complaint at the dwelling house or usual place of abode of the defendant named above with a person of suitable age and discretion then residing therein.
- ☐ As the defendant is a corporation, service was effected by delivering a copy of the summons and complaint to the person named below.

Name And Address Of Person With Whom Copies Left (If corporation, give title of person copies left with)

- ☐ Other manner of service (specify)

- ☐ Defendant WAS NOT served for the following reason:

<i>Service Fee Paid</i> \$	<i>Signature Of Deputy Sheriff Making Return</i>
<i>Date Received</i>	<i>Name Of Sheriff (type or print)</i>
<i>Date Of Return</i>	<i>County Of Sheriff</i>

NORTH CAROLINA
WILKES COUNTY

FILED

IN THE GENERAL COURT OF JUSTICE
DISTRICT COURT DIVISION
20-CVD- 147

2020 FEB -6 A 11:51
NORTH CAROLINA BAPTIST
HOSPITAL and WAKE FOREST
UNIVERSITY HEALTH SCIENCES CO., P.S.C.

BY whd
Plaintiffs,)

COMPLAINT
[COMP]

vs.)

WAYNE HOWARD DULA and HOPE M.
DULA,)

Defendants.)

Plaintiffs, complaining of the Defendants, allege and say:

1. Plaintiff North Carolina Baptist Hospital is a North Carolina corporation with its principal place of business in Forsyth County, North Carolina, which operates as Wake Forest University Baptist Medical Center.

2. Plaintiff Wake Forest University Health Sciences is a North Carolina corporation with its principal place of business in Forsyth County, North Carolina. The entity referred to herein as Wake Forest University Physicians ("WFU Physicians") is a division of Plaintiff Wake Forest University Health Sciences.

3. Upon information and belief, the Defendants are citizens and residents of Wilkes County, North Carolina.

4. Upon information and belief, the Defendants are neither infants nor incompetent.

5. Upon information and belief, the Defendants were married to each other at all times relevant to this action.

FIRST CLAIM

6. The allegations of Paragraph 1 and Paragraphs 3 through 5 are re-alleged and incorporated herein by reference as if fully set forth.

7. On or about November 13, 2017, Defendant Wayne Howard Dula was provided out-patient hospital care, medical treatment, medical supplies, and other goods and services by North Carolina Baptist Hospital. After partial payment, the account balance (Account No. 422422650) now due and owing is \$30,507.90.

8. On or about November 29, 2017, Defendant Wayne Howard Dula was provided out-patient medical services and treatment by North Carolina Baptist Hospital. After partial payment, the account balance (Account No. 422713436) now due and owing is \$382.30.

9. On or about February 7, 2018, Defendant Wayne Howard Dula was provided out-patient medical services and treatment by North Carolina Baptist Hospital. After partial payment, the account balance (Account No. 423424086) now due and owing is \$43.32.

10. The medical services and treatment referred to in Paragraphs 7 through 9 above were medically necessary to the health and well-being of Defendant Wayne Howard Dula

11. North Carolina Baptist Hospital charged its usual, customary and reasonable fees for all medical services and treatment provided to Defendant Wayne Howard Dula.

12. The total outstanding balance now due and payable to North Carolina Baptist Hospital is \$30,933.52.

13. North Carolina Baptist Hospital has made demand upon the Defendant Wayne Howard Dula for full payment of the outstanding charges now due, and he has failed and refused to pay same.

SECOND CLAIM

14. The allegations of Paragraphs 2 through 5 are re-alleged and incorporated herein by reference as if fully set forth.

15. On or about November 13, 2017, WFU Physicians provided medical services and treatment to Defendant Wayne Howard Dula. After partial payment, the account balance (Account Nos. 422532899 and 422544001) now due and owing is \$6,894.81.

16. On or about January 2, 2018, WFU Physicians provided medical services and treatment to Defendant Wayne Howard Dula. After partial payment, the account balance (Account No. 423074712) now due and owing is \$111.90.

17. On or about March 28, 2018, WFU Physicians provided medical services and treatment to Defendant Wayne Howard Dula. After partial payment, the account balance (Account No. 424089935) now due and owing is \$45.85.

18. On or about April 24, 2018, WFU Physicians provided medical services and treatment to Defendant Wayne Howard Dula. After partial payment, the account balance (Account No. 424403777) now due and owing is \$111.71.

19. The medical services and treatment referred to in Paragraphs 15 through 18 above were medically necessary to the health and well-being of Defendant Wayne Howard Dula.

20. WFU Physicians charged its usual, customary and reasonable fees for all medical services and treatment provided to Defendant Wayne Howard Dula.

21. The total outstanding balance now due and payable to Plaintiff Wake Forest University Health Sciences is \$7,164.27.

22. Plaintiff Wake Forest University Health Sciences has made demand upon the Defendant Wayne Howard Dula for full payment of the outstanding charges now due, and he has failed and refused to pay same.

PRAYER FOR RELIEF

WHEREFORE, Plaintiffs respectfully pray to the Court:

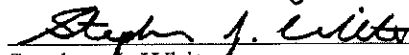
1. That Plaintiff North Carolina Baptist Hospital have and recover of the Defendants Wayne Howard Dula and Hope M. Dula, jointly and severally, the sum of THIRTY THOUSAND NINE HUNDRED THIRTY-THREE AND 52/100 DOLLARS (\$30,933.52), plus interest at the rate of eight percent (8%) per annum from the date of the filing of this Complaint;

2. That Plaintiff Wake Forest University Health Sciences have and recover of the Defendants Wayne Howard Dula and Hope M. Dula, jointly and severally, the sum of SEVEN THOUSAND ONE HUNDRED SIXTY-FOUR AND 27/100 DOLLARS (\$7,164.27), plus interest at the rate of eight percent (8%) per annum from the date of the filing of this Complaint;

3. That the costs of this action be taxed to the Defendants; and

4. That the Court grant such other and further relief as it deems just and proper.

This the 4 day of February, 2020.



Stephen J. White
Attorney for Plaintiffs
NC State Bar No. 49614

OF COUNSEL:

OTT CONE & REDPATH, P.A.
445 Dolley Madison Road, Suite 306
Greensboro, North Carolina 27410
Phone: 336-373-1300
Fax: 336-273-9353
sjw@ocrlaw.com

NORTH CAROLINA
FORSYTH COUNTY

VERIFICATION

Stephanie Hairston, being first duly sworn, deposes and says:

That she is Manager of Customer Service at Wake Forest Baptist Health; that, in this capacity, she is familiar with the books and records of North Carolina Baptist Hospital ("Baptist Hospital") relative to patient accounts; that such records are kept under her supervision and control; that they are kept in the normal course of Baptist Hospital's business; that the entries reflected therein are made at or near the time of the actual transactions; that the amount alleged as due in the Complaint is as reflected by Baptist Hospital's books and records; and that she has read the foregoing Complaint and the same is true of her own knowledge and belief, save and except those matters alleged therein on information and belief, and as to those matters, she believes them to be true.

This verification relates to Account Nos. 422422650, 422713436, and 423424086 for the care of Wayne Howard Dula.

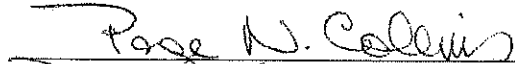
This the 15 day of January, 2020.

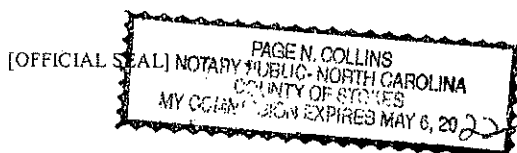

STEPHANIE HAIRSTON
Manager of Customer Service

FORSYTH COUNTY, NORTH CAROLINA

Signed and sworn to (or affirmed) before me this day by **Stephanie Hairston**.

Date: January 15, 2020


Page N. Collins, Notary Public
(PRINTED NAME OF NOTARY)



My Commission Expires: May 6, 2022

NORTH CAROLINA
FORSYTH COUNTY

VERIFICATION

Stephanie Hairston, being first duly sworn, deposes and says:

That she is Manager of Customer Service at Wake Forest Baptist Health; that, in this capacity, she is familiar with the books and records of Wake Forest University Health Sciences and Wake Forest University Physicians ("WFU Physicians") relative to patient accounts; that such records are kept under her supervision and control; that they are kept in the normal course of WFU Physicians' business; that the entries reflected therein are made at or near the time of the actual transactions; that the amount alleged as due in the Complaint is as reflected by WFU Physicians' books and records; and that she has read the foregoing Complaint and the same is true of her own knowledge and belief, save and except those matters alleged therein on information and belief, and as to those matters, she believes them to be true.

This verification relates to Wake Forest University Physicians' Account Nos.: 422532899, 422544001, 423074712, 424089935, and 424403777 for the care of Wayne Howard Dula.

This the 15 day of January, 2020.

Stephanie Hairston
STEPHANIE HAIRSTON
Manager of Customer Service

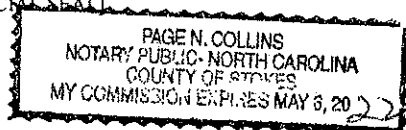
FORSYTH COUNTY, NORTH CAROLINA

Signed and sworn to (or affirmed) before me this day by **Stephanie Hairston**.

Date: January 15, 2020

Page N. Collins
Page N. Collins, Notary Public
(PRINTED NAME OF NOTARY)

[OFFICIAL SEAL]



My Commission Expires: May 4, 2022